

UNITED STATES PATENT AND TRADEMARK OFFICE  
Washington, DC 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>1/6/05</u>		2 Serial/Patent # <u>09/934,004</u>		
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
<input type="checkbox"/> Filing			\$	
<input type="checkbox"/> Amendment			\$	
<input checked="" type="checkbox"/> Extension of Time		12/22/04	\$ 1,020.00	
<input type="checkbox"/> Notice of Appeal/Appeal			\$	
<input type="checkbox"/> Petition			\$	
<input type="checkbox"/> Issue			\$	
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$	
<input type="checkbox"/> Maintenance			\$	
<input type="checkbox"/> Assignment			\$	
<input type="checkbox"/> Other			\$	
		7 TOTAL AMOUNT OF REFUND		\$ 1,020.00
		8 TO BE REFUNDED BY:		
		Treasury Check		
		Credit Deposit A/C #:		
		<div style="border: 1px solid black; display: inline-block; padding: 2px;">             03--1550           </div>		
10 REASON:				
<input type="checkbox"/> Overpayment				
<input type="checkbox"/> Duplicate Payment				
<input checked="" type="checkbox"/> No Fee Due (Explanation):				
No extension of time needed- application already abandoned				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Cliff Congo</u>		TITLE: <u>Attorney</u>		
SIGNATURE: <u>[Signature]</u>		PHONE: <u>571-272-3207</u>		
OFFICE: <u>Petitions</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>[Signature]</u>		DATE: <u>1/6/05</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B